1106102

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D



NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR JNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated average	je burden			
hours per respon	se 16.00			

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
1	1				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)				
Offering of Limited Partnership Interests	S NA AIL			
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Z Rule 506 Section	4(6) TULOE AECO			
Type of Filing: New Filing Amendment	SINED 83			
A. BASIC IDENTIFICATION DATA	JAN VO			
1. Enter the information requested about the issuer	2006.			
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	10 873 TON			
Common Sense Partners II, L.P.	SECTION			
Address of Executive Offices (Number and Street, City, State, Zip Co-	de) Telephone Number (Including Area Code)			
15350 S.W. Sequoia Parkway, Suite 140, Portland, OR 97224	(503) 639-6551			
Address of Principal Business Operations (Number and Street, City, State, Zip Co (if different from Executive Offices)	Telephone Number (Including Area Code)			
Brief Description of Business				
	PROCESSED			
Type of Business Organization				
	her (please specify) \ \ FEB @ 3 2008			
business trust limited partnership, to be formed	11/125 - 2000			
Month Year	Y THOMSON			
Actual or Estimated Date of Incorporation or Organization: 0 9 9 9 Actual	Estimated FINANCIAL			
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)				
GENERAL INSTRUCTIONS				

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

		A. BASIC ID	ENTIFICATION DATA			
2. Enter the information re	quested for the fol	lowing:				
• Each promoter of t	he issuer, if the iss	uer has been organized v	within the past five years;			
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue						
Each executive off	icer and director of	f corporate issuers and of	f corporate general and ma	naging partners of	partnership issuers; and	
 Each general and r 	nanaging partner o	f partnership issuers.		• • •		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner	
Full Name (Last name first, i Common Sense Investm		t LLC				
Business or Residence Addre 15350 S.W. Sequoia Par			•			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i	f individual)					
Bisenius, James A.—Ma	naging Director a	and CEO of Common	Sense Investment Mai	nagement LLC, (General Partner	
Business or Residence Addre	•	Street, City, State, Zip C Portland, OR 97224				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i Stuvland, Craig— Manag	,	President of Commo	on Sense Investment M	anagement LLC	, General Partner	
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)			
15350 S.W. Sequoia Parl	way, Suite 140,	Portland, OR 97224				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i	f individual)					
Strade, Kathy— Managin	g Director and S	r. Vice President of C	ommon Sense Investm	nent Managemer	nt LLC, General Partner	
Business or Residence Addre 15350 S.W. Sequoia Par					and the second s	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i Thompson, Scott—Mana	•	nd Sr. Vice President o	of Common Sense Inve	estment Manage	ment LLC, General Partner	
Business or Residence Addre 15350 S.W. Sequoia Par	•					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, i Gass, Richard—Managin		Sr. Vice President of (Common Sense Investr	ment Manageme	nt LLC, General Partner	
Business or Residence Addre 15350 S.W. Sequoia Pa	*					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner	
Full Name (Last name first, Derrah, Dean—Vice Pre	*	on Sense Investment	Management LLC, Ge	neral Partner		
Business or Residence Addre 15350 S.W. Sequoia Par						
 	(Tigo bio	-le about on agent and us	a additional conice of this	chaot or passesser	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	

	20	A. BASIC ID	ENTIFICATION DATA	<u> </u>	
Enter the information re	•	-	ithin the next five years:		
•		suer has been organized w	• •	of 100/ or more of	a class of equity securities of the issue
	• •	•	•	,	• •
		f partnership issuers.	corporate general and mar	laging partners of p	Jaithership issuers, and
Each general and i	nanaging partner o	i partnersing issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Harbolt, Tom—Vice Pres	•	n Sense Investment M	lanagement LLC, Gene	eral Partner	
Business or Residence Addre 15350 S.W. Sequoia Par	•	-	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
McGowan, Jonathan—V	ice President of	Common Sense Inves	tment Management LL	C, General Parti	ner
Business or Residence Addre 5350 S.W. Sequoia Park			ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)			-	
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ess (Number and	Street, City, State, Zip Co	ode)		
	(Use bla	ank sheet, or copy and use	additional copies of this s	heet, as necessary)	

B. INFORMATION ABOUT OFFERING							
Yes No 1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							
Answer also in Appendix, Column 2, if filing under ULOE.							
4 000 000	.00*						
2. What is the inhibition investment that will be accepted from any individual?							
Yes No 3. Does the offering permit joint ownership of a single unit?							
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any							
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.							
Full Name (Last name first, if individual) None							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Name of Associated Broker or Dealer							
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
(Check "All States" or check individual States)							
(Check All States of theek mulvidual states)							
AL AK AZ AR CA CO CT DE DC FL GA HI ID	-						
IL IN IA KS KY LA ME MD MA MI MN MS MO							
MT NE NV NH NJ NM NY NC ND OH OK OR PA	•						
RI SC SD TN TX UT VT VA WA WV WI WY PR	İ						
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Business of Residence Address (Number and Siteet, City, State, Zip Code)							
Name of Associated Broker or Dealer							
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers							
(Check "All States" or check individual States)	:						
AL AK AZ AR CA CO CT DE DC FL GA HI ID	1						
IL IN IA KS KY LA ME MD MA MI MN MS MC							
MT NE NV NH NJ NM NY NC ND OH OK OR PA							
RI SC SD TN TX UT VT VA WA WV WI WY PR]						
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							
Name of Associated Broker or Dealer	States in Which Person Listed Has Solicited or Intends to Solicit Purchasers						
Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All State	;						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	_						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers]						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) AL AK AZ AR CA CO CT DE DC FL GA HI ID]						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) All State AL AK AZ AR CA CO CT DE DC FL GA HI ID IL IN IA KS KY LA ME MD MA MI MN MS MC]]						

^{*} General Partner has discretion to accept lesser amounts. 3 of 9

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF P	ROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	0.00	\$ 0.00
	Equity	0.00	\$ 0.00
	Common Preferred		
	Convertible Securities (including warrants)	0.00	\$
	Partnership Interests		270,288,057.00
	Other (Specify)		\$ 0.00
	Total	400,000,000	00 \$ 270,288,057.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	82 *	\$_265,313,782.00
	Non-accredited Investors	7 *	\$ <u>4,974,276.0</u> 0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		. \$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_85,000.00
	Accounting Fees		\$ 112,000.00

Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately)

Other Expenses (identify) filing fees, travel expenses, etc.

Total

\$ 6,700.00

 \mathbf{Z}

\$ 203,700.00

^{*}As this is a multi-year, ongoing offering, totals are reflective of current U.S. investors and investment amounts.

	b. Enter the difference between the aggregate offer	ring price given in response to Part C Question	n 1	
	and total expenses furnished in response to Part C— proceeds to the issuer."	Question 4.a. This difference is the "adjusted gr	oss	\$ <u>270,084,357.00</u>
5.	Indicate below the amount of the adjusted gross proceeds to the jurposes shown. If the amount for an check the box to the left of the estimate. The total or proceeds to the issuer set forth in response to Part	ny purpose is not known, furnish an estimate a f the payments listed must equal the adjusted gr	and	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		-	□\$ 0.00
	Purchase of real estate			□ \$ 0
	Purchase, rental or leasing and installation of mad		L	
	and equipment			\$0.00
	Construction or leasing of plant buildings and fac	ilities	🗌 \$ <u>0.00</u>	\$_0.00
	Acquisition of other businesses (including the val	ue of securities involved in this		
	offering that may be used in exchange for the asso issuer pursuant to a merger)		\$ 0.00	\$_0.00
	Repayment of indebtedness		_	\$ 0.00
	Working capital		- -	\$ 270,084,357.00
	Other (specify):		\$0.00	\$ 0.00
			 	\$
	Column Totals		S 0.00	\$270,084,357.00
	Total Payments Listed (column totals added)			70,084,357.00
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	rnish to the U.S. Securities and Exchange Com	mission, upon writt	
Iss	uer (Print or Type)	Signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Date	
Co	ommon Sense Partners II, L.P.	I Thomas Y. Harbol	January 13, 200	06
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

- ATTENTION

Vice President of Common Sense Investment Management LLC, General Partner

Tom Harbolt

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)